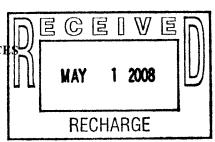
## ARIZONA DEPARTMENT OF WATER RESOURCE

Water Management Division 3550 North Central Ave, 2<sup>nd</sup> Floor Phoenix, Arizona 85012-2105 Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION FOR A RECOVERY WELL PERMIT (§ 45-834.01)

APPLICATION FEE OF \$ 50.00 PER WELL FOR THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL THEREAFTER IS DUE UPON FILING

1. Name of Applicant: City of Surprise

PERMIT FEE (SAME AS APPLICATION FEES), PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, ARE DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR OFFICE USE ONLY	
Application No. <u>74-565003.06</u> 0	0
Date Received 5-1-08	

	F 1			
	12425 W. Bell Road, Suite D100	Surprise	AZ	85374-9002
	Maning Address	City	State	Zip
	Contact Person Christine Nunez	Telephone <u>623.222.7035</u>	Fax	x <u>623.222.1002</u>
2.	Name of Active Management Area or Irrigation	n Non-Expansion Area if applicabl	e, and name of a	groundwater basin and
	subbasin where the facility will be located $\underline{Wes}$	st Salt River Valley Subbasin ir	the Phoenix A	Active Management
	Area.			
3.	Name of the owner(s) of the land where wellsite	s are located <u>Buena Vista Holdin</u>	gs LLC	
	Mailing Address 7505 East 6 <sup>th</sup> Avenue, No.	t 1 for Consent		
	(If more than one owner, attach	a list showing corresponding land of	owner and well i	registration number(s)).
4.	Legal description of the land where water will be	(quarter/quarter/qu <b>Attachment</b>	arter/section, to	T4N R3W  ownship and range)  oosed water system
		area		
5.	The recovered water will be used for Construction	ion & Future Service Area	1000	

6.	The recovery wells will be used to recovery	ver water stored pursuant to Water Storage Permit No. 73-562521.0002
	or long-term storage account number. 7	0-441155

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

Name of Well Owner	Well Registration Number	Location: 1/4,1/4,1/4, Section. Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (Inches)	Proposed Annual Volume (Acre-Feet)	Date Well Constructed
Buena Vista Holdings LLC	55-214510	NW SW NW § 11 T4N R3W	1,900	1,500	16	2,742	9/2007
- State Communication							

8. Complete the following for each proposed well to be constructed.

Well Registration Number	Location:  1/4,1/4,1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well
·							
X				·			

I (We), City of Surpr		, the applicant(s) named	in this application	, do hereby certify under
the penalty of perjury, that the information of belief true, correct and complete.	contained and statem	ents made herein are t	o the best of m	y (our) knowledge and
benef due, correct and complete.			. 1	•
	Ke	11.100	' //	
623.222.7001	Jan	1 Wille	- 1/1	4/17/08
Telephone	Signature of owner	or authorized agent	- Allendaria	77.700
	1)	Ann M/1	Dates	Pringe
	- INYEC	FUR Of U	mui-	Ja vices
	Title	$\mathcal{O}$		
12425 W. Bell Road, #D100		Surprise	AZ	85374-9002
Mailing Address		City	State	Zip
		p.		
STATE OF ARIZONA				OFFICIAL SEAL
STATE OF ARIZONA	) ) ss.			LORIA G. BIANCO
County of Maricopa	) 55.		NU NU	FARY PUBLIC - State of Artages   MARICOPA COUNTY
	·/		My	Comm. Expires Sept. 1, 2009
	2.1	0 1 1		
Subscribed and sworn to before me this	24 day of	april	, 20	
	-	<b></b>		
alouis la lace	c. 1			
June Jun	$\omega$			
Notary Public				
9-1-09				
My commission expires:				